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Before the  
**FEDERAL COMMUNICATIONS COMMISSION**  
Washington, DC 20554

JAN - 9 2017

FCC Mailroom

In the Matter of )  
Schools and Libraries ) CC Docket No. 02-6  
Universal Service Support Mechanism )  
)

**COX REQUEST FOR WAIVER OF  
INVOICE DEADLINE FOR FUNDING YEAR 2014**

Cox Georgia Telcom, LLC ("Cox") hereby requests a waiver of the invoice deadline for E-Rate Funding Year 2014, contained in Section 54.514 of the Commission's rules ("Rules"), 47 C.F.R. § 54.514, to permit it to correct a typographical error in a Service Provider Invoice ("SPI") that caused the Universal Service Administrative Company ("USAC") to approve the invoices "for \$0 because the customer billed date was outside the funding year." (USAC email correspondence from December 20, 2016 attached as Exhibit A and the Service Provider Invoice is attached as Exhibit B)

DOCKET FILE COPY ORIGINAL

**Background**

Cox was the Service Provider to Applicant Bibb County School District ("Applicant") during Funding Year 2014. Due to a USAC review of Applicant's funding requests over multiple funding years, USAC delayed approval of Applicant's FY 2014 funding request. Cox was advised by USAC staff to submit the SPI prior to the invoicing deadline, which Cox did (see Exhibit B), and was told that USAC would hold it until the funding requests were approved, which occurred recently. However, as noted above, Cox inadvertently misdated the Customer Billed Dates on the SPI. The Customer Billed Dates Cox provided were 02/14, 03/14, 04/14, 05/14, and 06/14 instead of the correct dates of 02/15, 03/15, 04/15, 05/15, and 06/15 (see Block

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2 on Exhibit B). This resulted in USAC approval “for \$0 because the customer billed date was outside the funding year.” This “approval” effectively denied funding to Cox. Cox was further advised by USAC staff to seek this waiver so USAC can extend the invoice deadline, permitting Cox to submit a corrected SPI with accurate Customer Billed Dates.

Following is information on the funding request in question:

**SPIN:** 143008929

**Service Provider:** Cox Georgia Telcom, LLC

**Applicant:** Bibb County School District

**FCC Form 471 Application Number:** 941778

**Funding Request Number:** 2632427

**Total Invoice Amount:** \$ [REDACTED]

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**Relief Sought**

Cox respectfully requests the Commission waive the invoicing deadline for FY2014 (February 25, 2016) contained in Section 54.514 of the Rules so that Cox may submit a corrected SPI consistent with the above.

Respectfully submitted,



Diane Law-Hsu  
Senior Counsel Corporate Counsel  
Regulatory Affairs  
Cox Communications, Inc.  
6205 Peachtree Dunwoody Road  
Atlanta, GA 30328

January 6, 2017

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FCC Form 474  
Do Not Staple This Form

Do not write in this space.

Approved by OMB  
OMB Control No. 3060 - 0856  
Estimated time per response: 1.0 hour

Schools and Libraries Universal Service  
Service Provider Invoice FCC Form 474  
Please read instructions before completing  
This form can be filed online or by mail.

Service Provider Form Identifier (Create an identifier for your own reference)  
BIBBCOUNTY FEB-JUN15  
FCC Form 474 Invoice #  
(To be inserted by administrator)

1. Service Provider Name	
Cox Georgia Telcom, LLC	
2. Service Provider Identification Number (SPIN)	
143008929	
3. Contact Person's Name	
Kristina Perez	
4. Contact Telephone Number	Area Code: Phone Number: Ext.
	(623) 328-3191
Contact Fax Number	Area Code: Fax Number:
	623 3222168
Contact Email Address	
kristina.perez@cox.com	
5. Total Invoice Amount (total of Block 2, Column 13)	
\$	

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Approved by OMB  
OMB Control No. 3060-0856

SPIN 143008929  
Service Provider Form Identifier BIBBCOUNTY FEB-JUN15  
Contact Person Kristina Perez  
Contact Telephone Number (623) 328-3191

Block 2, Page \_\_\_\_ of \_\_\_\_  
Make as many copies of this page as necessary.

and number the completed pages to assure that they are all processed correctly.

**BLOCK 2: Funding Request Number Information**

6	7	8	9	10	11	12	13
FCC Form 471 Application Number (from Funding Decision Letter)	Funding Request Number (FRN) (from Funding Decision Letter)	Bill Frequency (e.g., Monthly, Quarterly, Annually, One-time, Other)	Customer Billed Date (mm/yyyy)	Shipping Date to Customer or Last Day of Work Performed (mm/dd/yyyy)	Total (Undiscounted) Amount for Service per FRN	Discount Rate	Amount Billed to USAC (Column 11 multiplied by Column 12)
			For each FRN, there should be an entry in Column 9 or Column 10 but NOT BOTH				
1	941778	2632427	MONTHLY	02/2014	\$[REDACTED].00	86	\$[REDACTED].00
2	941778	2632427	MONTHLY	03/2014	\$[REDACTED].00	86	\$[REDACTED].00
3	941778	2632427	MONTHLY	04/2014	\$[REDACTED].00	86	\$[REDACTED].00
4	941778	2632427	MONTHLY	05/2014	\$[REDACTED].00	86	\$[REDACTED].00
5	941778	2632427	MONTHLY	06/2014	\$[REDACTED].00	86	\$[REDACTED].00
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
TOTAL REIMBURSEMENT AMOUNT TO BE ENTERED INTO ITEM 5							

**Service Provider Invoice FCC Form 474**

**Service Provider Form Identifier** BIBBCOUNTY FEB-JUN15

**Contact Person** Kristina Perez

**Contact Telephone Number** (623) 328-3191

**Block 3: Service Provider Certifications & Signature**

I declare under penalty of perjury that the foregoing is true and correct and that I am authorized to submit this Service Provider Invoice Form (FCC Form 474) and acknowledge to the best of my knowledge, information and belief, as follows:

- A. I certify that this Service Provider is in compliance with the rules and orders governing the schools and libraries universal service support program and I acknowledge that failure to be in compliance and remain in compliance with those rules and orders may result in the denial of discount funding and/or cancellation of funding commitments.
- B. I certify that the certifications made on the Service Provider Annual Certification Form (FCC Form 473) by this Service Provider are true and correct.
- C. I acknowledge that failure to comply with the rules and orders governing the schools and libraries universal service support program could result in civil or criminal prosecution by law enforcement authorities.

14. Signature of authorized person

15. Date

16. Printed name of authorized person

**Kristina Perez**

17. Title or position of authorized person

18. Telephone number of authorized person

**(623) 328-3191**

19. Address of authorized person

**20401 N. 29th Ave.  
Phoenix AZ 85027**

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

**FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT**

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERF, Paperwork Reduction Act Project (3060-0856), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

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**THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.**

**Do not staple the FCC Form 474.**

Please submit this form to:

**SLD SPI FCC Form 474  
P. O. Box 7026  
Lawrence, KS 66044-7026**

For express delivery services or U.S. Postal Service, Return Receipt Requested, mail this form (pages 1-4) to:

**SLD Forms  
ATTN: SLD SPI FCC Form 474  
3833 Greenway Drive  
Lawrence, KS 66046  
888-203-8100**